

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE		
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O.I.P.E. CLASSIFIER					
FORMALITY REVIEW		827	3-6-01		
RESPONSE FORMALITY REVIEW	<u> </u>	927	03/2/10		

INDEX OF CLAIMS

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If more than 150 claims or 10 actions staple additional sheet here